

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/558994

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)	SMALL ENTITY TYPE	<input type="checkbox"/>	OTHER THAN SMALL ENTITY
U.S. NATIONAL STAGE FEES	71		RATE	<input type="checkbox"/>	RATE
BASIC FEE	SMALL ENT. = \$ 150	LARGE ENT. = \$ 300	BASIC FEE	<input type="checkbox"/>	BASIC FEE
EXAMINATION FEE	Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200	EXAM. FEE	<input type="checkbox"/>	EXAM. FEE
SEARCH FEE	U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400	ALL other situations = \$ 250 / \$ 500	SEARCH FEE	<input type="checkbox"/>	SEARCH FEE
FEE FOR EXTRA SPEC. PGS.	149 minus 100 = 49 / 50 = 1		X \$ 125 =	<input type="checkbox"/>	X \$ 250 =
TOTAL CHARGEABLE CLAIMS	71 minus 20 = * 51		X \$ 25 =	<input type="checkbox"/>	X \$ 50 =
INDEPENDENT CLAIMS	3 minus 3 = *		X \$ 100 =	<input type="checkbox"/>	X \$ 200 =
MULTIPLE DEPENDENT CLAIM PRESENT	N	<input type="checkbox"/>	+ \$ 180 =	<input type="checkbox"/>	+ \$ 360 =
			TOTAL	<input type="checkbox"/>	TOTAL

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

		(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY	<input type="checkbox"/>	OTHER THAN SMALL ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	X \$ 25 =	<input type="checkbox"/>
	Independent	*	Minus	***	=	X \$ 100 =	<input type="checkbox"/>
					+ \$ 180 =	<input type="checkbox"/>	+ \$ 360 =
					TOTAL ADDIT. FFF	<input type="checkbox"/>	TOTAL ADDIT. FFF
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							

		(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY	<input type="checkbox"/>	OTHER THAN SMALL ENTITY
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	X \$ 25 =	<input type="checkbox"/>
	Independent	*	Minus	***	=	X \$ 100 =	<input type="checkbox"/>
					+ \$ 180 =	<input type="checkbox"/>	+ \$ 360 =
					TOTAL ADDIT. FFF	<input type="checkbox"/>	TOTAL ADDIT. FFF
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.